PART B - FEE(S) TRANSMITTAL

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or Fax

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20311 7	590 08/05/2004		have its own ce	rtificate of mailing or transmission.		
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	T PU DIO DATE	FIDOTALA	AMED INSTENSION	A TTOPAIDY DOCKET NO	CONFIRMATION NO.	
APPLICATION NO.	FILING DATE	<u> </u>	MED INVENTOR	ATTORNEY DOCKET NO.		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE		DATE DUE	
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EXAM	MINER	ART UNIT	CLASS-SUBCLASS			
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